N2200012929

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON:	ındation, Inc.		
DOCEMENT NUMBER.	N22000012929			
DOCUMENT NUMBER:				
The enclosed Articles of Art	nendment and fee are sub	nitted for filing.		
Please return all correspond	ence concerning this matte	er to the following:		
Maksim Slyusarchuk				
		(Name of Contact Po	erson)	
Slyusarchuk Foundation, In	c.			
<u> </u>		(Firm/ Company	y)	
1720 Harrison Street, 7th F	loor			
		(Address)		
Hollywood, Fl. 33020				
		(City/ State and Zip	Code)	
max.slyusarchuk@admortg	age.com			
	-mail address: (to be used	for future annual rep	ort notification	n)
For further information con-	cerning this matter, please	call:		
Kristina Kamanina		at	786	807-2580
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida I	Department of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi s Certifi	0 Filing Fee icate of Status ied Copy tional Copy is used)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The Slyusarchuk Foundation, Inc.			
(Name of Corporation as currently filed with the F	lorida Dept. of State)		
N22000012929			
(Documen	t Number of Corporation (if	known)	
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not I	For Profit Corporation adopts the	following
A. If amending name, enter the new name of the co	orporation:		
Slyusarchuk Foundation, Inc.			The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporat	ed" or the abbreviation "Corp." o	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	DRESS)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	(X)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered		a, enter the name of the	23 HAR -
Name of New Registered Agent:			<u>۔۔۔</u>
			PH.
New Registered Office Address:	(Florida street address)	5 : 36
_		Florida	
	(Ciṇ)	(Zip Code)	
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		ot the obligations of the position.	
	Signature of New Regi	stered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	-		
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: ssary). (Be specific)	

·		
		
		
		
	·	10.
	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	ock does not meet the applicable statutory filing requirements, this date will no	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
Signature (By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
Maksim Slyusarchuk (Typed or printed name of person signing)				
Director/Incorporator				
(Title of person signing)				